

APPLICATION FOR UNITED STATES PATENT DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CLIENT SERVER SYSTEM AND COMMUNICATION METHOD THEREOF

described and claimed in the specification:

Check one

*a. ☒ attached hereto.

b. ☐ filed on _____ as Application and amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to this Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.

Under Title 35, U.S. Code § 119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed by me or my legal representative(s) or assigns within one year prior to this application are hereby claimed:

Number	Country	Date/Month/Year filed
2000-052022	Japan	28/02/2000
2000-320829	Japan	20/10/2000

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s):

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

James A. Cliff, Reg. No. 27,075; William F. Berridge, Reg. No. 30,024;

Rick M. Hudson, Reg. No. 27,562; Thomas J. Pardini, Reg. No. 30,411;

Edward P. Waller, Reg. No. 31,450; Robert A. Miller, Reg. No. 32,771;

Marie A. Costantino, Reg. No. 33,565; and Stephen J. Roe, Registration No. 34,468.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, P.C., P.O. BOX 10959, ALEXANDRIA, VIRGINIA 22309, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Typewritten Full Name

of First or Sole Inventor Takeo MIYAZAWA

Given Name Middle Initial Family Name

** Inventor's Signature: M. Takeo

** Date of Signature: 7th Feb. 2001

Month Day Year

Residence: Mitaka-shi Tokyo Japan

City State or Province Country

Citizenship: Japan

Post Office Address:

(Insert complete Prestige S&TW2, 12-3, Shimo-Renjaku 4-chome, Mitaka-shi

mailing address,

including country) Tokyo 181-0013, Japan

*If Box (a) is checked, this form may be executed only when attached to the specification (including claims).

*Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE ☒

PAGE 2 OF U.S.A. DECLARATION FORM
(Discard this page in a sole inventor application)

Type-written Full Name
of Second Joint Inventor (if any) Tetsuya OKADA
Given Name Middle Initial Family Name

** Inventor's Signature: T. Okada

** Date of Signature: 7 Feb 2001

Month Day Year
Residence: Suginami-ku Tokyo Japan
City State or Province Country

Citizenship: Japan

Post Office Address:
(Insert complete mailing address, including country) Tokyo Heim, 6-5, Koenji-Minami 3-chome, Suginami-ku
Tokyo 168-0003, JAPAN

Type-written Full Name
of Third Joint Inventor (if any) _____
Given Name Middle Initial Family Name

** Inventor's Signature: _____

** Date of Signature: _____

Month Day Year
Residence: _____
City State or Province Country

Citizenship: _____

Post Office Address:
(Insert complete mailing address, including country) _____

Type-written Full Name
of Fourth Joint Inventor (if any) _____
Given Name Middle Initial Family Name

** Inventor's Signature: _____

** Date of Signature: _____

Month Day Year
Residence: _____
City State or Province Country

Citizenship: _____

Post Office Address:
(Insert complete mailing address, including country) _____

Type-written Full Name
of Fifth Joint Inventor (if any) _____
Given Name Middle Initial Family Name

** Inventor's Signature: _____

** Date of Signature: _____

Month Day Year
Residence: _____
City State or Province Country

Citizenship: _____

Post Office Address:
(Insert complete mailing address, including country) _____

**Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first Page of the Declaration and Power of Attorney form of the application to which it pertains.

09785504-022001